

10/549463

J005 Rec'd PCT/PTO 14 SEP 2005

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?: None
Computer Readable Form (CRF)?:: No
Title:: ROTATABLE AND ARTICULATED
MATERIAL HANDLING APPARATUS
Attorney Docket Number:: 061300-0843
Request for Early Publication?: No
Request for Non-Publication?: No
Suggested Drawing Figure:: 4
Total Drawing Sheets:: 6
Small Entity?: No
Petition included?: No
Secrecy Order in Parent Appl.?: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Zhendong (Mike)
Family Name:: Zhou
City of Residence:: Mequon
State or Province of Residence:: WI
Country of Residence:: US
Street of mailing address:: 7921 West Rolling Field Drive
City of mailing address:: Mequon

State or Province of mailing address::	WI
Postal or Zip Code of mailing address::	53097
Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Michael
Family Name::	Yanacek
City of Residence::	Oshkosh
State or Province of Residence::	WI
Country of Residence::	US
Street of mailing address::	356 West 19th Avenue
City of mailing address::	Oshkosh
State or Province of mailing address::	WI
Postal or Zip Code of mailing address::	54902
Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Jon
Family Name::	Morrow
City of Residence::	Neenah
State or Province of Residence::	WI
Country of Residence::	US
Street of mailing address::	1224 Kampo Court
City of mailing address::	Neenah
State or Province of mailing address::	WI

Postal or Zip Code of mailing address:: 54956

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: James
Family Name:: Gullickson
City of Residence:: Kaukauna
State or Province of Residence:: WI
Country of Residence:: US
Street of mailing address:: 2402 Sullivan Avenue
City of mailing address:: Kaukauna
State or Province of mailing address:: WI
Postal or Zip Code of mailing address:: 54130

Correspondence Information

Correspondence Customer Number:: 26371
E-Mail address:: PTOMailMilwaukee@foley.com

Representative Information

Representative Customer Number::	26371	
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US2004/008080	03/17/2004
This Application	An application claiming the benefit under 35 USC 119(e)	60/455,149	03/17/2003

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name:: Oshkosh Truck Corporation